Disability in Iowa

Executive Summary

According to the Americans with Disabilities Act¹, a person with a disability (PWD) is generally defined as someone who has a physical or mental impairment that substantially limits one or more "major life activities," has a record of such impairment, or is regarded as having such impairment.

The Centers for Disease Control & Prevention (CDC) estimates more than 54 million Americans have an activity limitation or disability associated with a long-term physical, sensory, or cognitive condition. The prevalence of disability in the U.S. population has been measured fairly consistently at 18-19 percent. In Iowa the adult population with a disability is generally estimated at 376,000 (16%) according to the CDC Behavioral Risk Factor Surveillance System (BRFSS). For this report, data from the American Community Survey 2003-2007 was also analyzed.

Any-disability prevalence

On average, 14.7% of Iowans over five years of age have some kind of disability.

From 2003 to 2007, there was a U-shaped prevalence trend. The prevalence of disability was 14.7% in 2003 and decreased to 14.0% in 2004. Since then, the prevalence has gradually increased to 15.9% in 2007. (Figure 1)

Among Iowans with a disability from 2003 - 2007, 58% had one disability. These were primarily a physical disability (58%), followed by sensory (22%), and mental (20%). Approximately 42% of Iowans with a disability had two or more disabilities. Of these, 89% were physical limitations. (Figure 2)

The prevalence of physical disability reached over 5% at 45 years of age and continuously increased with age. Mental disability (including limitations in remembering, concentration and learning) was greatest among youths aged 5 to 17. Sensory disabilities (such as vision and hearing) were mostly prevalent among Iowans over the age of 65 years.

Demographics

At younger ages, males were more likely to have a disability than females. At older ages, females outnumbered males. Between 5 and 24 years of age, males had 50% increased prevalence of disability than females. Across all races, African Americans in Iowa had the highest disability prevalence; Hispanics had the lowest with a respective prevalence of 20% and 8%. Whites had a prevalence of 15%. (Caution should be used when interpreting race and gender differences since the prevalence was not age-adjusted.)

Any-Disability Trend

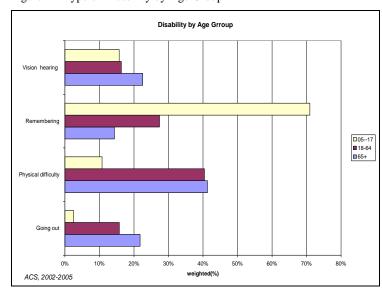
16.5%
16.0%
15.5%
15.0%
14.0%
13.5%

2003 2004 2005 2006 2007 5year <u>ACS,200</u>3-2007

Figure 1 – Disability Prevalence

13.0%

Figure 2 – Type of Disability by Age Group



¹ Section 503 of the Rehabilitation Act of 1973, and Section 188 of the Workforce Investment Act.

Healthy Behaviors

Iowans with disability reported they smoked more, exercised less and drank less alcohol than Iowans without disability. (Figure 3) The prevalence of these risky behaviors among people with disabilities was: Smoking (24%), lack of moderate physical activities (26%), drinking (43%).

Overall, Iowans have great heath care access, with an enrollment rate of 90% in some form of health insurance coverage. However, people with disabilities aged 18 to 64 were less likely to have insurance (56% vs. 74%). Caution should be used in interpreting this finding, due to survey participants' refusal rate for this question among those with disabilities (35% vs. 16%).

Health Behaviors & Access

Health Behaviors & Access

100%
80%
40%
20%
SMOKING DRINKING EXERCISING Have health care coverage

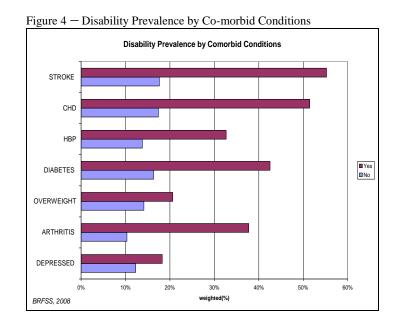
Co-morbid Conditions (BRFSS, 2002-2008)

According the 2002-2008 Behavioral Risk Factor Surveillance System Survey estimates, on average 16.5% of Iowans older than 18 years had some kind of physical limitation due to a health problem. Of these, 5.6% needed equipment to manage their disability. The overall average prevalence of disability among adult Iowans was 18%.

On average, disability prevalence was associated with chronic conditions. Iowans with a history of stroke, coronary heart disease, diabetes and arthritis had a 2.5 times higher prevalence of disability compared to Iowans without those conditions.

Health impairment increases significantly with age irrespective of disability status.

The prevalence ratio was greater among the youth. Compared to youths without disability, those with disability had five times the increased prevalence of physical health-impaired days, and twice as much for mental health and other poor health problems. (Table 1)



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Table 1 – Health Impairment by Age

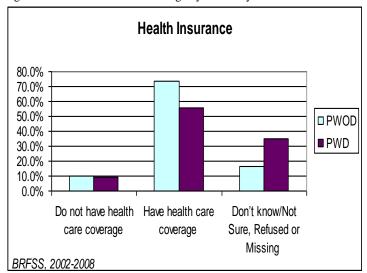
Type of Impairment		At least ONE day due to Health Impairment	
	Age	PWD	PWoD
Physical Health			
	18-44	19.0%	5.3%
	45-64	41.8%	10.9%
	65+	54.1%	20.8%
Mental Health			
	18-44	14.3%	7.1%
	45-64	33.8%	15.8%
	65+	49.3%	29.7%
Poor Health			
	18-44	25.3%	8.9%
	45-64	51.8%	22.6%
	65+	66.3%	40.9%

Health Impairment by Disability Status

In the 18-64 age groups, people with disability were less likely to have insurance than those without, with

a respective insurance coverage of 56% vs. 74%. (Figure 5)

Figure 5 – Health Insurance Coverage by Disability Status

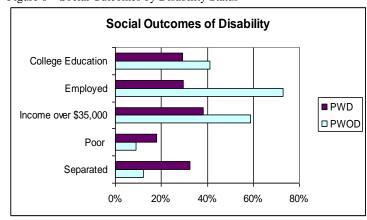


Social Outcomes

Iowans with disability, compared to those without, were more likely to be separated (15% vs. 9%), less likely to have a college education (29% vs. 41%), and less likely to have regular employment (30% vs. 73%). (Figure 6)

In addition, people with disabilities have an increased rate of poverty and overall lower income levels. Of Iowans with disability, 18.9% were considered poor compared to 9.1% of those without. On average, over 64% of adult Iowans with disability earned less than \$35,000 a year whereas only one-third of Iowa adults without disability earned less than \$35,000.

Figure 6 – Social Outcomes by Disability Status



Conclusion

Disability among Iowans is a main source of health disparities. Iowans with disabilities are faced with greater likelihood of co-morbid conditions such as arthritis, high blood pressure, obesity, diabetes, cardiovascular disease, and problems related to smoking. These, added to the other social conditions faced by Iowans with disabilities (such as poverty, unemployment, and lack of affordable housing) result in additional negative impact on their lives.